## PART B - FEE(S) TRANSMITTAL

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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  20350 7590 10/04/2006			Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
TOWNSEND AND TOWNSEND AND CREW, LLP TWO EMBARCADERO CENTER EIGHTH FLOOR SAN FRANCISCO, CA 94111-3834			Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
			Margaret K.	Stephan	(Depositor's name)
11/21/2006 WABDELR3 00000054 201430 10649172			Margaret	Style	(Signature)
01 FC:1501 1400.00 DA 02 FC:1504 300.00 DA			November 17.	2006	(Date)
03 FC 2000 CATION NO. 15.00 DA FILING DATE		FIRST NAMED INVENT	OR .	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/649,172 08/26/2003 Nobuyuki Saika 16869S-091700US 4794					
TITLE OF INVENTION: SYSTEM AND METH	OD FOR MANAGING A	A STORAGE DEVICE			
APPLN. TYPE SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISSUE	E FEE TOTAL FEE(S) DU	JE DATE DUE
nonprovisional NO	\$1400	\$300	\$0	\$1700	01/04/2007
EXAMINER	ART UNIT	CLASS-SUBCLASS			
FILIPCZYK, MARCIN R	2163	707-001000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		(1) the names of up or agents OR, altern (2) the name of a si registered attorney	ingle firm (having as a or agent) and the name attorneys or agents. If i	member a 2es of up to	and Crew LLP
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)					
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.					
(A) NAME OF ASSIGNEE			ITY and STATE OR C	OUNTRY)	
Hitachi, Ltd.		Tokyo,	Japan		
Please check the appropriate assignce category or	categories (will not be pr	rinted on the patent) :	☐ Individual ☑XCo	orporation or other private g	group entity Government
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EXPublication Fee (No small entity discount permitted)  EXAdvance Order - # of Copies		☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 20-1430 (enclose an extra copy of this form).			
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